THE MINISTER OF CONSUMER AFFAIRS, FOOD AND PUBLIC DISTRIBUTION (SHRI SHARAD PAWAR): (a) to (d) In Rabi Marketing Season 2009-10, a quantity of 248.8 lakh tonnes of wheat has been procured till 30.6.2009 as against 226.89 lakh tonnes procured in RMS 2008-09. At the start of wheat procurement in RMS 2009-10, 131.7 lakh tonnes of wheat procured in previous years was available in the central Pool. Due to record procurement of wheat in RMS 2009-10 and of rice in KMS 2008-09, shortage of covered space has been experienced by FCI and state agencies. In order to address the problem of shortage of storage capacity, various steps have been taken by FCI and State agencies which, *inter-alia*, include hiring of additional storage space, direct dispatch from mandis to consuming States and storage of new stocks in Cover and Plinth (CAP) storage.

Government policy on tackling Swine Flu

*36. SHRI SUBHASH PRASAD YADAV: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Swine Flu (H1N1 virus) has been declared a pandemic;

(b) if so, the details thereof along with the number of people affected;

(c) the measures initiated and proposed to be initiated to check its spread in the country;

(d) the number of hospitals equipped in the country to handle it; and

(e) the policy guidelines of the Government in this regard?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI GHULAM NABI AZAD): (a) and (b) Yes, Sir. World Health Organisation [WHO] raised the pandemic alert level from Phase 5 to Phase 6 on 11th June, 2009. As per the WHO assessment, the overall severity of Influenza pandemic is moderate. The disease has as on 29th June, 2009, spread to 116 countries with 70893 laboratory confirmed cases and 311 deaths. In our country, the first case was reported on 13th May, 2009. Since then there have been 109 laboratory confirmed cases of Influenza A H1N1 [swine].

(c) On World Health Organization informing about the influenza A/H1N1 [earlier referred as Swine Flu], Government of India took a series of actions. A comprehensive plan including guidelines and standard operating procedures were put in place. Travel advisory was issued to defer non essential travel to the affected countries. Entry screening of passengers started at 22 international airports and five international checkpoints through an informative health screening card and still continuing. On an average, 45,000 passengers are screened daily. About 27 lakh passengers have been screened. 211 passengers with symptoms were isolated in identified health facilities and tested for influenza A/H1N1 infection. The communication efforts have resulted in nearly 500 passengers with symptoms self reporting [as on 30th June, 2009].

Community surveillance to detect clusters of influenza like illness is being done through Integrated Disease Surveillance Project which has pan India presence. National Institute of Communicable Diseases, Delhi and National Institute of Virology, Pune, are testing clinical samples. Sixteen additional laboratories have also started testing for influenza A H1N1 from 1st of July, 2009.

All States have been requested to gear up the State machinery and strengthen isolation facilities including critical care facilities at district level. In addition to trained rapid response teams and team of physicians at state level, district level teams are undergoing training to investigate outbreak and to manage them.

There is adequate quantity of Oseltamivir, the drug recommended by World Health Organization. Ten million capsules are in stock. Another six million is in stock as banking arrangement with pharmaceutical companies. Stockpile of personal protective equipments is increased from one lakh to ten lakhs.

Travel advisory, do's and don'ts and other pertinent information has been widely published to alley fear and avoid panic. Media is kept informed on daily basis.

(d) All States wherein ports, airports and international check points are located, have identified hospitals with isolation facilities where patients are now being treated. There are 26 such hospitals. Apart from these, patients progressing to pneumonia can be treated in district and sub-district hospitals and those developing respiratory distress in medical college and other tertiary care referral hospitals.

(e) The policy of the Government is to prevent entry of the disease into India, detect cases early, to prevent and contain spread in the community. If the disease spreads widely in our community, then effort would be to mitigate the pandemic and providing appropriate medical care to those affected. The pandemic preparedness and response calls for actions in sectors beyond health. National Disaster Management Authority has issued guidelines for such actions.

Government is fully geared up to deal with the situation.

Suggestion of Planning Commission for sale of foodgrains

†*37. SHRI RAJ MOHINDER SINGH MAJITHA:
SHRI SHIVANAND TIWARI:

Will the Minister of CONSUMER AFFAIRS, FOOD AND PUBLIC DISTRIBUTION be pleased to state:

(a) whether it is a fact that Planning Commission has suggested alternate way to sell foodgrains in place of selling it through Public Distribution System;

(b) if so, the details of such suggestions;

(c) whether Government has taken any decision to implement these suggestions; and

†Original notice of the question was received in Hindi.